Addendum: Mutual Family Assessment

Family Name Date of last approval □ Part of a scheduled renewal OR ☐ An update to the assessment prior to renewal Please check which of the following apply, and describe in the narrative: o Change in family or home (e.g., household composition, Reason for addendum: marital status, health or finances) Failure to comply with requirements Follow-up to an allegation or finding of abuse/neglect Addition of child-specific or matching information (for adoption) o Other: Please specify below Worker completing addendum: Signature and Date Director or Designee approving addendum: Signature and Date **ADDENDUM**

(type narrative below—the family name automatically repeats on each page)